UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEC Mail Processing Section

FORM D

Washington, DC 110

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix		Serial				
	DATE	RECEIVED				
	i					

hours per response16.00

3235-0076

April 30, 2008

OMB Number:

Estimated average burden

Expires:

Name of Offering (check if this is an ame Intermountain Pension Fund, Ltd.	ndment and name ha	s changed. and indic	cate change.)		
Filing Under (Check box(es) that apply):	☐ Rule 505	☑ Rule 506	☐ Section 4(6)	ULOE	
Type of Filing: ☑ New Filing	☐ Amendment				
	A. BASIC II	DENTIFICATION	ON DATA		
1. Enter the information requested about the	ssuer				
Name of Issuer (check if this is an amendmentermountain Pension Fund, Ltd.	nent and name has ch	anged, and indicate	change.)		40397
Address of Executive Offices c/o M&C Corporate Services Limited, Po George Town, Grand Cayman, Cayman	e Number (Including 19-8066	Area Code)			
Address of Principal Business Operations (if different from Executive Offices)	e Number (Including	Area Code)			
Brief Description of Business Private Investment Fund					PROCESSE
	nited partnership, alromited partnership, to		☑ other of Cayman	(please specify): Islands exempted	conFEB, 2 5 2008
Actual or Estimated Date of Incorporation or Jurisdiction of Incorporation or Organization:	Organization: 0 (Enter two-lette	2 0 8 er U.S. Postal Service; FN for other foreig	☑ Actual e abbreviation for S	☐ Estimated	FINANCIAL N

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

 Each general and managing 	partner of partners	ship issuers.				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Ø	General and/or Managing Partner
Full Name (Last name first, if ind BlackRock Financial Managen		stment manager of Issu	uer)			
Business or Residence Address 40 East 52 nd Street, New Yor		treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				•	
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	0	General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	street, City, State, Zip Cod	e)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director		General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	treet, City, State, Zip Cod	e)			· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	0	General and/or Managing Partner
Full Name (Last name first, if ind	ividual)					
Business or Residence Address	(Number and S	street, City, State, Zip Cod	e)			
	(Use blank shee	t, or copy and use addition	nal copies of this sheet, as	necessary.)		

B. INFORMATION ABOUT OFFERING													
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.								Yes	No ☑				
2. What is the minimum investment that will be accepted from any individual?									\$50,000,000 *unless waived				
 Does the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. 									Yes ☑	No □			
Full Na	me (Last nar	ne first, if ir	ndividual)					•••					
	plicable.							<u> </u>					
Busines	s or Residen	ce Address	(Numbe	er and Stree	t, City, State	e, Zip Code))						
Name o	f Associated	Broker or I	Dealer										
States in	Which Pers	son Listed I	las Solicited	l or Intends	to Solicit Pu	ırchasers							
(Chec	ck "All State	s" or check	individual S	States)	***************	***************	****************		**************	**************			
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] {IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Na	me (Last nar	ne first, if it	idividual)										
Busines	s or Residen	ce Address	(Numbe	er and Stree	t, City, State	e, Zip Code)	<u> </u>					
Name o	f Associated	Broker or l	Dealer				 .						
States in	Which Per	son Listed I	las Solicited	l or Intends	to Solicit Pu	ırchasers							
(Chec	ck "All State	s" or check	individual S	States)		***************************************	******						
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full Na	me (Last nar	ne first, if it	idividual)										
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)									All States				
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	

[TN] [TX] [UT] [VT] [VA] [WA] [WV]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security		Aggregate Offering Price	An		t Already old
	Debt	S	•	S		0
	Equity					n N
	□ Common □ Preferred	Ψ.		"		<u>U</u>
	Convertible Securities (including warrants)	\$	0	\$		0
	Partnership Interests					0
	Other (Specify) Participating Non-Voting Shares					0,000,000
	Total					
	I otal	3 _	4,999,900,000	\$		0,000,000
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number Investors	D	ollar	regate Amount rchases
	Accredited Investors	_	1	S	7	0,000,000
	Non-accredited Investors		0			0
	Total (for filings under Rule 504 only)	_	N/A	\$		N/A
	Answer also in Appendix, Column 4, if filing under ULOE.	_				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		Turne	D		Amount
	Type of Offering		Type of Security	ט		old
	Rule 505	_	N/A	\$_		0
	Regulation A		N/A	\$_		0
	Rule 504		N/A	S		0
	Totał			S		0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			.		<u> </u>
	Transfer Agent's Fees			\$		0
	Printing and Engraving Costs		_	<u> </u>		0
	Legal Fees		Ø	ç		125,000
	Accounting Fees		Ø	ζ <u> </u>		25,000
	_			٠ <u>-</u>		23,000
	Engineering Fees		l _e j	⊅		0
	Sales Commissions (specify finders' fees separately)		rbr	ֆ <u>—</u>		
	Other Expenses (identify) Administrative/Custodial Fees		Ø	<u> </u>		55,000
	Total		Ø	\$	—	205,000

C. OFFERING PRICE, NUMBER	OF INVESTORS, EXPENSES AND	USE OF PR	OCEE	DS	
 Enter the difference between the aggregate offic Question 1 and total expenses furnished in respect difference is the "adjusted gross proceeds to the" 	oonse to Part C - question 4.a. This		s _	4,999,695	5,000
5. Indicate below the amount of the adjusted gross proceed for each of the purposes shown. If the amount for any purpose the box to the left of the estimate. The total of gross proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate and the payments listed must equal the adjusted				
		Payments Officers, Dir & Affilia	ectors	Payments Others	
Salaries and Fees		□ \$	0		0
Purchase of real estate		□ \$		□ \$	
Purchase, rental or leasing and installation of machine	ry and equipment	□ \$	0_	□ \$	0
Construction or leasing of plant buildings and facilitie	s	□ \$		□ \$	
Acquisition of other businesses (including the value of be used in exchange for the assets or securities of another.)	f securities involved in this offering that may her issuer pursuant to a merger)	□ \$	0_	□ \$	0
Repayment of indebtedness		□ \$	0	□ \$	0
Working capital		□ \$	0	□ \$	0
Other (specify) Investment in securities		□ \$	0	☑ \$ <u>4,999,69</u>	5,000
Column Totals		□ \$	0	☑ \$ <u>4,999,69</u>	<u> 5,000</u>
Total Payments Listed (column totals added)		Ø	\$ <u>4,999</u>	<u>,695,000</u>	
D	. FEDERAL SIGNATURE				
The issuer has duly caused this notice to be signed by the usignature constitutes an undertaking by the issuer to furnish information furnished by the issuer to any non-accredited in	to the U.S. Securities and Exchange Commissi	on, upon writt	r Rule 50 en reque	5, the followingst of its staff,	ng the
Issuer (Print or Type)	Signature		Date		-
Intermountain Pension Fund, Ltd.	2115019		Febru	ary 14, 200	8
Name of Signer (Print or Type)	fitle of Signer (Print or Type)	0			
	Investment Manager of Issuer				
Name of Signer (Print or Type)	Title of Signer (Print or Type)				
Marie M. Bender	Managing Director of Investment Manage	r			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

